



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ENERGY AND
ENVIRONMENTAL AFFAIRS
Department of Agricultural Resources
251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 fax 617-626-1850 www.Mass.gov/AGR



**RIDING SCHOOL/STABLE LICENSE
APPLICATION**

New License ____ Tentative opening date _____

Renewal ____ April 1, 20____ to March 31, 20 ____ License # _____

Has this stable moved to a new location? YES ____ NO ____

COUNTY _____ DATE OF APPLICATION _____

MY STABLE NAME _____ PHONE NUMBER _____

STABLE ADDRESS _____

I Own / Lease this Stable (circle one)

APPLICANTS NAME _____ PHONE NUMBER _____

APPLICANTS ADDRESS _____

MANAGER NAME _____ PHONE NUMBER _____

STABLE VETERINARIAN _____ PHONE NUMBER _____

Stable Capacity _____ Number of Horses Present _____

Horses used for: Lessons ____ Hay Rides ____ Carriage Rides ____ Pony Rides ____ Sleigh Rides ____

Rentals ____ Driving ____ Sale ____ Other ____

Licensed Instructors: (please list)

Instructor License Number: (mandatory)

I/We certify under penalties of perjury that I/We have read the Laws and Rules & Regulations applicable to Riding School/Stables and Instructors, MGL Chapter 128 Sec. 2A & 2B and agree to abide by same. I/We certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes and that the requirements per Massachusetts General Law, Chapter 152, Workmen's Compensation have been complied with.

Signature of Applicant

Signature of Manager

**APPLICATION FEE IS \$100.00 MADE PAYABLE TO THE COMMONWEALTH OF MASSACHUSETTS
ALL CHANGES TO THIS APPLICATION MUST BE REPORTED TO THE DIVISION AT 617-626-1797.**